

ISSUE SLIP STAPLE AREA (for additional cross references)

PORTION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		6	10-10-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	S A	689-66	11-5-01

INDEX OF CLAIMS

✓ Rejected N  
 - Allowed I  
 - (Through numeral) Canceled A  
 + Restricted O

Non-elected  
 Interference  
 Appeal  
 Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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